

Northern Virginia Long-Term Care UPDATE

Information and Issues from Northern Virginia Long-Term Care Ombudsman Program

From Young to Old

We Will Not Forget September 11, 2001

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Two months ago, the unthinkable happened -- the USA was the victim of terrorism; more than 6000 dead. Most of us were starting that day just as any other. We were just going about "living our lives," and it happened. Most of us watched the horror on television; many of us received phone calls and were told to turn on the television. Many of us lost loved ones that day. Some of us still do not really believe this could have happened, not here on our soil. And then there are those who still do not understand or know that it happened, maybe because of illness, memory loss, Alzheimer's, or other impairments/ailments.

Since September 11, our nation has worked hard to return to "normal." I am not sure what "normal" really is, but I am acutely aware that we will never know "normal" again. Not as we have in the past. Perhaps we need another word; it just may be that normal needs redefining now.

Much attention has been given to how to help the children, the individuals most affected by the WTC and Pentagon. But little has been said about the Elders. Many think that our Elders are coping better than anyone. The reason: they have been in or seen war before. They have lived through horror; therefore, they are better equipped to cope with this tragedy. It has even been suggested that the Elders are calmer than anyone else because they have lived the best part of their lives already! I happen to disagree with most of these analogies. I concur that

people who have been through the great depression and world wars and conflict have experienced something that I cannot imagine. It just may be that although those events happened many years ago, it somehow prepared those involved for a day like September 11. I believe our Elders are the wisdom keepers, those we can learn from, and those we can talk with at times when the world seems out of order. Our Elders have additional things to think about as well. I have spoken with Veterans of WWII who would gladly go into war "for this one," others who are consumed with grief and fear for their children and grandchildren. Many Elders have talked to me about feeling helpless, feeling that they are no longer able to do something in order to make things better. These Elders have lived through a lot in their lives, but never dreamed that they would live to see such mass destruction here in our beloved country. These are the same people who tell me how difficult it is to share these emotions with their children for fear that they will appear as fragile or weak.

I also believe that our Elders are much like the rest of us: they are shocked, fearful and outraged by the events of September 11. Although our wisdom keepers have lived through wars, no one has ever witnessed an attack of this magnitude on US soil, involving more than 6,000 deaths.

We as a nation and a community will need help in coping with this reality for some time to come. We are all in this one together; the children, teens, adults, baby boomers, and elderly. We all have a responsibility to each other now, a responsibility to recognize that post-traumatic stress and depression may find their ways into our lives and the lives of those we love.

It is true that we cannot cry hard enough, but there

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Northern Virginia Long-Term Care Ombudsman Staff

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**[www.co.fairfax.va.us/service/aaa/html/
 Ombud_main.htm](http://www.co.fairfax.va.us/service/aaa/html/Ombud_main.htm)**

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is strength in tears -- there is honor in grief and there is hope always for healing. As I look into the eyes of men and women of the military, the FBI, ATF, Pentagon Police, American Red Cross workers, families and members of my community, I find myself continually amazed at the resiliency of the human spirit. I also find all of us traumatized in ways unimagined from the very young to the very old.

I want you to know the importance of allowing yourself to feel the pain, the trauma and the shock while moving forward in your day-to-day lives. As we move toward living our lives differently than ever before, I would like to offer tools to facilitate the healing.

- There is no shame in asking for what you need.
- Talk about September 11 with friends, family. Talk about the feelings that are yours alone, TALK, TALK, TALK!
- Understand in your heart that your feelings are a natural reaction to a very abnormal situation.
- Remember that we are all united in this act of terrorism, in our grief and in our healing.

- Talk about your fears.
- Make efforts to find a routine; lean into others for help.
- Be aware that the nature of terrorist attacks creates fear and uncertainty. They try to make us helpless and hopeless victims who will not stand up. (That is not the way of Americans.)
- Limit your exposure to the pain.
- Encourage your friends to talk about their feelings.
- Remember there is nothing quite as powerful -- even pain -- than human touch.
- If you having trouble coping with the aftermath of September 11 and with the pain of loss and fear, consider seeking help from a mental health specialist.
- Know your grief will be delayed because of the sudden horror of these attacks.
- To renew the spirit, the body and the soul is to believe and to stand together in unity during times of great adversity while healing the pain within.

Be prepared for your family member to "downplay" their emotions and coping since September 11. No one likes to feel "afraid, fearful or weak of spirit" in front of family members. There is something about mothers and fathers protecting their children from their feelings; we have all seen it before. I would hope that we could find a way to get beyond that barrier, even if it means getting creative. Maybe writing a letter to your family member in order to share your innermost thoughts and emotions would be easier than talking face to face.

Our wisdom keepers: they have lived through much and seen more. But they have never seen or felt the results of September 11. We all stand on the same ground regarding the events of September 11 and the days since. I wish you hope and healing in the

days ahead. Reach out and touch while talking about those many feelings and thoughts: it will help. God bless all of us again and again.

Ms. Showalter will host an evening dedicated to coping with the aftermath of September 11: January 11, 2002, 6:30 - 8:30 p.m., Marriott Courtyard in Rosslyn. Call 703-323-9359 for details.

Communication Corner

Dealing With Problem Behaviors Associated With Alzheimer's Disease

The long second stage of Alzheimer's Disease (AD) is often characterized by difficult behavioral changes. This is also the time that most families seek nursing facility care. Successful facilities and nursing facility staff learn to adapt the facility environment and to individualize the approach to each resident, rather than attempting to change the resident's behavior.

Residents with Alzheimer's disease (AD) do not deliberately become irrational, stubborn, suspicious, or angry. In fact, their anger toward staff is rarely meant for the staff. Many of these seemingly irrational angry episodes are due to changes within the resident that he or she finds difficult to describe in words.

While residents with AD may not behave like well-functioning adults, most retain adult feelings of shame and embarrassment. The approach to the resident must respect these adult feelings and protect the resident from failure or embarrassment. Protecting the resident also protects his or her family, friends, or visitors from undue embarrassment.

As residents with AD become progressively more unsure of their surroundings or of what is expected of them, they become more dependent on staff and family for reassurance and security. As they lose

the ability to understand their surroundings, many residents with AD fear being left or forgotten. Therefore, all approaches to specific problem behavior should have the following general goals:

- Promote resident/family security. Reassure the resident that family knows where he or she is and that staff is there to help him or her. Reassure family that staff will consistently repeat what the patient needs or wants to know as needed.
- Celebrate the parts of the intact resident that remain. Do not be overly concerned with the bad days or unrealistically encouraged by good days.
- Reassure sustained care. "We won't leave you here where your family cannot find you!"
- Substitute for resident's lost adult abilities. "We'll make sure that your parent puts on clean clothes and not the same outfit each day."
- Make up for the resident's lost impulse control. Head off, redirect, or divert the resident. Do not ask twenty questions while the resident is upset.
- Model more helpful techniques which show respect for the resident's adult feelings.

Source: Lisa P. Gwyther, ACSW, Care of Alzheimer's Patients: A Manual for Nursing Home Staff. Adapted and Reprinted with permission from the American Health Care Association and the Alzheimer's Association.

The Communication Corner addresses information on dementia and dementia-related diseases. Please address comments to ythom1@co.fairfax.va.us

Don't forget our web site with helpful information for residents, families, caregivers, and professionals:
www.co.fairfax.va.us/service/aaa/html/Ombud_main.htm

News...

Twenty-one new volunteers have joined our ranks! After a rocky start (on September 11), the training for everyone was finally completed on Oct. 26th. Many thanks again to all who helped (or offered to help) with the training. Placements are underway now. The net effect is that the Ombudsman Program now has a total of 55 volunteers!

Congratulations...

Our Director, **Rita Schumacher**, has been selected for an Outstanding Performance Award by Fairfax County! We staff (Laura, Nancy, Yolanda, and Jacquie) nominated her, and we are thrilled that Rita's exceptional skills as a manager and a resident advocate have been recognized.

We'd like to know...

DO YOU TREAT PAIN AS THE "FIFTH VITAL SIGN"?

Nursing Home Administrators: We are collaborating with the Fairfax Commission on Aging on a survey about pain management in local nursing facilities. After your staff checks temperature, pulse, respiration, and blood pressure, do they assess pain in the resident?

Watch for a discussion of pain management in our next edition of Update.

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